OIF	A * \		- ree(s) ina			
Complete and send this form, together with applicable			ee(s), to: <u>Mail</u>	Commissioner 1 P.O. Box 1450		
AUG 0 1 2005 E			Alexandria, Vir or <u>Fax</u> (703) 746-4000		rginia 22313-1450	•
INSTRUCTIONS: This for	below or directed otherwise	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBLIC	CATION FEE (if requestion of maintenance fees	quired). Blocks 1 through 5 will be mailed to the currents; and/or (b) indicating a sep	should be completed where t correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
7590 06/22/2005 DINSMORE & SHOHL LLP					ertificate of Mailing or Tran	
Suite 500 One Dayton Centre Dayton, OH 45402-2023				I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.		
08/02/2005 WABDELR3 00000094 10659081				William A. Jividen-Reg. No. 42,695(Depositor's name)		
01 FC:1501 02 FC:1504		July 29, 2005 (Signature) (Date)				
APPLICATION NO.	FILING DATE		FIRST NAMED INVEN	TOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/659,081	09/10/2003		Jigish D. Trived	i	MIO 0079 VA	2733
TITLE OF INVENTION: SUPPRESSION OF CROSS DIFFUSION AND GATE DEPLETION						
APPLN. TYPE	SMALL ENTITY	ISSUE F	EE PU	JBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	) 	\$300	\$1700	09/22/2005
EXAMINER		ART UN	IT CI	ASS-SUBCLASS	J	
FOURSON III, GEORGE R 282				438-199000		
<ol> <li>Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).</li> <li>Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.</li> <li>"Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.</li> </ol>			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (			(B) RESIDENCE: (CITY and STATE OR COUNTRY)			
Micron Technology, Inc.			Boise, Idaho			
Please check the appropriate assignee category or categories (will not be printed on the patent):						
4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):						
Issue Fee	. 11	. 1\	A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.			
Publication Fee (No small entity discount permitted)  Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).			
5. Change in Entity Status (from status indicated above)  a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.  b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).						
The Director of the USPTO NOTE: The Issue Fee and Printerest as shown by the reco	is requested to apply the Issublication Fee (if required) vords of the United States Patential States Patent	ue Fee and Publicate vill not be accepted ent and Trademark	tion Fee (if any) or to I from anyone other the Office.	re-apply any previou nan the applicant; a re	sly paid issue fee to the applic gistered attorney or agent; or	ation identified above. the assignee or other party in
Authorized Signature				Date _Ju	ıly 29, 2005	
Typed or printed name William A. Jividen				Registratio	on No. 42,695	
This collection of informatio an application. Confidentiali submitting the completed ap this form and/or suggestions Box 1450, Alexandria, Virgi Alexandria, Virginia 22313-	ty is governed by 35 U.S.C. plication form to the USPT for reducing this burden, shain 22313-1450. DO NOT	11. The information 122 and 37 CFR 122 and 37 CFR 123 O. Time will vary could be sent to the SEND FEES OR C	n is required to obtain 1.14. This collection depending upon the Chief Information COMPLETED FORM	or retain a benefit by is estimated to take 12 individual case. Any officer, U.S. Patent an IS TO THIS ADDRE	y the public which is to file (ar 2 minutes to complete, includi comments on the amount of t d Trademark Office, U.S. Del SS. SEND TO: Commissioner	nd by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450,

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.